HIV Testing History – Pre-test Version: Description and Forms Completion Instruction Sheet

This instruction sheet should be used as a guide for obtaining and recording an HIV testing history during pre-test counseling or when a client's HIV status is not yet known. It is meant to give surveillance sites that conduct HIV antibody testing an understanding of what information is needed for an HIV testing history and why it is important. The responses are used to assign an incidence estimation weight to the STARHS result.

The instruction sheet serves as a guide for obtaining an HIV testing history and for the completion of two of the forms that CDC has developed to record that information, the pre-test version of the HIV Testing History Questionnaire (Pre-test THQ) and Part D of the Program Evaluation Monitoring System (PEMS) Counseling, Testing, and Referral (CTR) Form. The PEMS CTR form is a scanable data collection tool, while the Pre-test THQ was designed to be both an interview and data collection tool. Counselors may choose to read the questions in the Pre-test THQ aloud to clients or give it to the client to complete as a self-administered questionnaire. Counselors who choose to use the Pre-test THQ as an interviewer administered tool are encouraged to develop their own personal style for asking the questions, and use the questionnaire form as a guide. The information collected here may be taken from other sources if available, and the questionnaire may be shortened accordingly. Only one question (regarding the reason for testing) must be asked as it appears on the Pre-test THQ.

This guide will demonstrate the location of each of the required pieces of information related to the client's HIV testing history on each of the CDC designed forms. Regardless of the source of the information, counselors working in CDC-funded HIV Counseling, Testing, and Referral sites located in areas funded for HIV Incidence Surveillance must record testing history information on Part D of the PEMS CTR form or use a system compliant with CDC's requirements. Counselors from non-federally funded sites should record their clients' responses on the Pre-test THQ form and return it to the jurisdiction's HIV/AIDS surveillance coordinator.

Counselors should make every effort to ensure that testing history information is complete for each client. If the Pre-test THQ is self-administered the counselor should check the questionnaire briefly after the client has completed it and attempt to clarify any questions that were left blank if possible. If the client is unwilling, or unable to answer a question upon further probing the questions should be marked "refused" or "don't know" on the questionnaire sheet by the counselor.

In the Pre-test THQ there are several varied types of font. For the purposes of the questionnaire and this instruction sheet:

instructions that explain what the question is asking and why are printed in italics

specific messages to the client are

set off in text boxes.

and can be read aloud if

the questionnaire is to be administered by a counselor

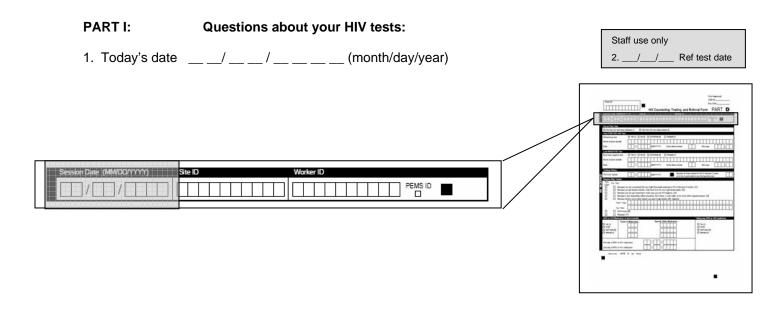
instructions that explain skip patterns are indicated with an arrow (=>) and are set off in text boxes using extra large and bold font.

Below each question from the Pre-test THQ its location on the PEMS CTR form is depicted graphically. Most of the questions appear on Part D of the PEMS CTR form except for two questions about whether the client has had a previous HIV test and a previous positive HIV test. As noted in the description of those questions and, as depicted graphically, those questions are located on Part A of the PEMS CTR form.

Instruction Sheet

The following question typically will not be asked as the counselor will be able to determine the date without input from the client. The staff use only box (#2) should be used to record the date of the HIV test if the Pre-test THQ was completed after blood for the HIV antibody test was drawn, but before the results are known, or if the HIV antibody test will be administered at some point after the Pre-test THQ is completed. The PEMS CTR form does not allow for more than one date because the CTR from is completed at the time of the HIV antibody test.

Thank you for filling out this form. Remember that all the answers you give will be kept private. Some of the answers that you give will allow you to skip some of the questions. If you are not told to go to a different question, please answer the questions in order.



The following question must be asked as written. Cognitive testing of the Pre-test THQ showed that when the order or wording of the question was changed, clients gave different answers to the question and were often confused and/or distracted by the question. The interviewer should seek "Yes" or "No" answers to the subparts of this question and should mark these responses on the form used, or have the client mark yes or no for each subpart if the counselor is using the Pre-test THQ as a self-administered qusetionnaire. This question is used to determine the specific reasons for testing and assists in assigning an incidence estimation weight to the STARHS result.

- 3a asks whether the client is being tested because he/she has had a recent experience (unsafe sex or injection drug use, accidental needle stick, etc.) that he/she feels put him/her at risk for HIV infection. In this case, a positive test result would be more likely to be an incident case.
- 3b asks whether the client is tested regularly (every 3months, 6 months, yearly, etc.). It is <u>not</u> asking whether the test is part of routine medical care, which could mean that the client has an HIV antibody test every time he/she sees the

doctor, regardless of the interval. If the client is only testing as part of a pattern of regular testing, then the incidence estimate weight for the STARHS result would be assigned according to the length of time since the last negative test.

- 3c asks if the client has no particular reason other than to reassure him/herself (for example, some people test when they start a new relationship or have some other change in their life).
- 3d asks if the test is not the client's idea, but rather is a requirement of some other entity.
- 3e allows the client to give another reason for testing that may not have been asked (other reasons might include pregnancy or Nucleic Acid Testing (NAT)).

3.	Why are yo	u getting an H	V test today?	Are you getting	the test:	(please	check y	es or no
for eac	h question))						

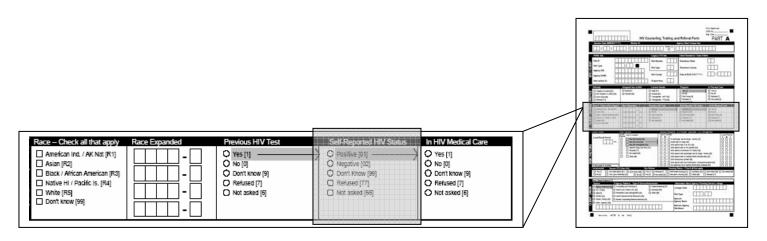
[a] Because you think/are worried that you might have been exposed to HIV in the past 6 months?	□ ₀ No	□₁ Yes
[b] Because you get tested on a regular basis (for example, once a year or every six months), and it is time for you to get tested again?	□ ₀ No	□₁ Yes
[c] Because you are just checking to make sure you are HIV negative?	\square_0 No	□₁ Yes
[d] Because you are required to get this test by either insurance, the military, a court order, or by some other agency?	□₀ No	□₁ Yes
[e] Because there is some other reason you wanted to get tested? If so, what is the reason?	□₀ No	□₁ Yes

The next question is designed to provide the interviewer or client with an opportunity to skip questions that would be inappropriate for someone who is coming for his/her first HIV antibody test. If the response is "No," or if the client is unsure or refuses to answer the question, the interviewer proceeds directly to questions regarding antiretroviral medication use. If this client's specimen is eligible for STARHS, and the client has never

had an HIV test before, demographic and risk factor data will be used to assign an incidence estimation weight to the STARHS result. If the client has had a previous HIV test (and answers "yes" to the question below), the client's testing history will also be considered in assigning this weight. On the PEMS CTR form the response to this question should be recorded on Part A.

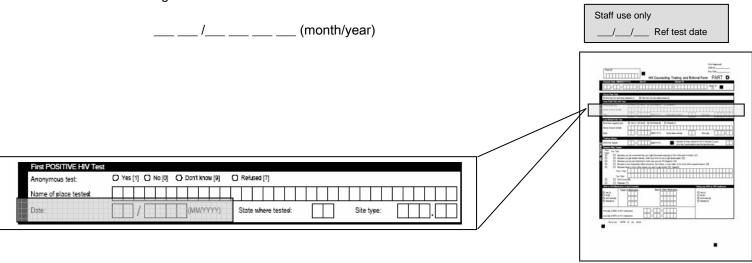
4. Have you ever been tested for HIV before today? Yes...... No..... \square_0 Please go to Part II: HIV Medicines on page 3 I don't want to answer..... I don't know..... In HIV Medical Care Previous HIV Test American Ind. / AK Nat IR11 O Yes [1] O Positive [01] O Yes [1] Asian [R2] O No [0] ☐ Black / African American [R3] O Don't know [9] O Don't Know [99] O Don't know [9] ☐ Native HI / Pacific Is, IR41 C) Refused [7] ☐ Refused [77] Refused [7] Not asked [6] O Not asked [6] ☐ White [R5] ○ Not asked [66] □ Don't know [99]

Again, the following question provides the interviewer or client with the chance to skip several questions. If the client has been tested previously but has never had a positive test (which will be typical among clients who are receiving pre-test counseling), the interviewer can skip several questions that would only be appropriate if the client had tested positive at some point in the past. Clients might answer "Yes," if they are seeking to confirm an earlier diagnosis or perhaps as a way to facilitate status disclosure to a partner. The blood from the current test is likely to be ineligible for STARHS unless their first positive test was less than 3 months ago, and a remnant specimen from that first positive test is not available for STARHS. The response to this question is recorded on Part A of the PEMS CTR form.



For the following question, it is very important to know when the client's first positive test was conducted (i.e., when blood was drawn or when oral fluid or urine was collected). Simply asking when the person received a positive test result is not appropriate, because the client may not have returned for his or her results in a timely manner, and the date that he/she learned of the positive result may not be indicative of when he/she tested positive. The gray, "staff use only" box is included so that sites that choose to use the Pre-test THQ as an interviewer administered tool can write the first positive date here and refer back to it when asking questions later in the questionnaire. In addition, the box serves as a prompt to enter this date into the HIV Incidence Surveillance database as the date of the first positive test.

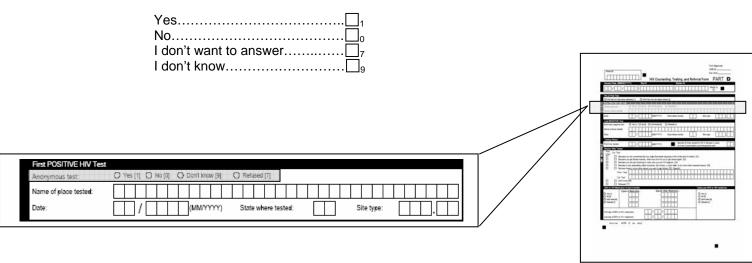
4b. What was the month and year of the very first time you tested positive for HIV? List when you got your test, not when you got your results. We will refer to this test date again.



The next question is asked to determine whether the client's original test report would be found in the HIV/AIDS Reporting System (HARS/eHARS). If it were, STARHS would not be performed on the client's blood from the current HIV antibody test. In addition, the

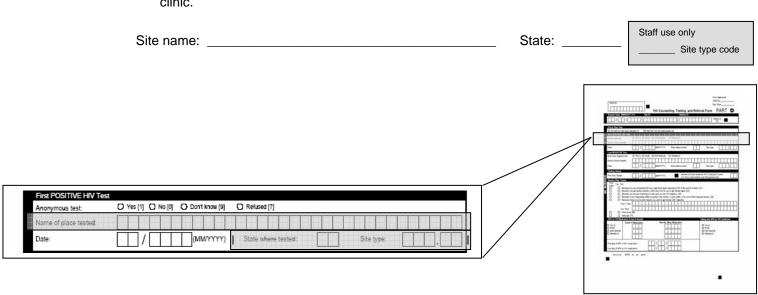
response to this question will assist in determining the weight assigned to the STARHS result when estimating incidence.

4c. When you first tested positive for HIV (on the date in question 4b) were you given a number or a code to use to get your results instead of your name? (check one box).



Next, the counselor will seek the name and state of the site of the client's first HIV positive test. This question will assist in tracking the client's information in HARS/eHARS. In addition, because it is assumed that testing patterns and rate of positivity vary based on the location and type of testing facility, this question is used in the calculation of the incidence estimation weight for the STARHS result. The client should be asked to classify the type of facility if this information is not obvious from the client's response. Site type codes for the PEMS CTR form can be found on the back of Part D.

4d. What was the name of the place where you got your first positive HIV test? For example, this could be the name of a health clinic, blood bank, doctor's office, or STD clinic.



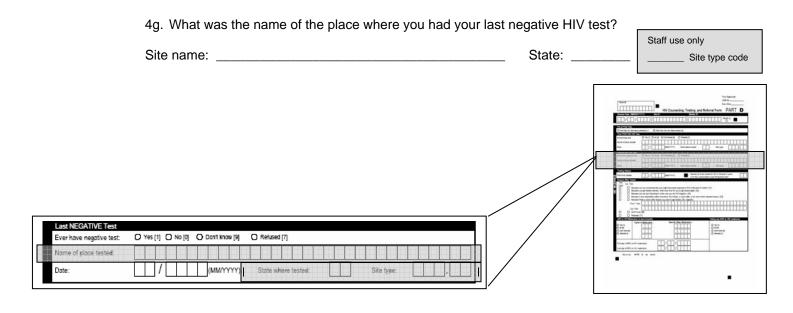
As with the first reason for testing question, the following question must be asked as written, and the interviewer or the client should mark each response as "Yes" or "No." These questions are used to assign an incidence estimation weight to the STARHS result.

	hen you got your first HIV positive test (on the date in question 4b), di st: (please check yes or no <u>for <mark>each question</mark>)</u>	d you get th	е
[a]	Because you thought/were worried that you might have been exposed to HIV in the 6 months before the test?	□ ₀ No	□₁ Yes
[b]	Because you got tested on a regular basis (for example, once a year or every six months), and it was time for you to get tested again?	□₀ No	□ ₁ Yes
[c]	Because you were just checking to make sure you were HIV negative?	□ ₀ No	□₁ Yes
[d]	Because you were required to get the test by either insurance, the military, a court order, or by some other agency?	□ ₀ No	□₁ Yes
[e]	Because there was some other reason you wanted to get tested? If so, what was the reason?	□ ₀ No	□₁ Yes
☐ Because you get tested routinely, ☐ Because you are just checking to r	ou might have been exposed to HIV in the past 6 months. [01] and it was time for you to get tested again. [02] nake sure you are HIV negative. [03] nsurance, the military, a court order, or for some other required reason. [04] an you want to get tested [05]. (Specify)		To the search of the control of the

Next the counselor asks when the client had his/her last HIV negative test. If the client has never tested HIV-positive before, then the last HIV negative test would be the test prior to the current test (because the client does not yet know the results of the current test). If the client has previously tested HIV positive, then he/she would provide the date of the last HIV negative test before his/her first positive test. It is important to determine when the client last had a negative test because this date will play a key role in determining the weight assigned to the STARHS result. For example, if the client received a negative result less than six months ago, and then tests positive, the probability that his/hers is an incident case is 100%, and the STARHS result is therefore given a weight of "1" in the incidence estimation.

	4f. What was the month and year that you got your when you got your test, not when you got your result /	
	I have not had a negative HIV test	Please go to Question <u>5</u>
Last NEGATIVE Test Ever have negative test: Name of place tested: Date:	O Yes [1] O No [0] O Dan't Know [9] O Refused [7]	West Consisting Trades, and factor from PSRT D West Consisting Trades, and fa

The next question asks the name and state of the client's most recent HIV negative test. Because it is assumed that testing patterns and rate of positivity vary based on the location and type of testing facility, this question is used in the calculation of the incidence estimation weight for the STARHS result. The client should be asked to classify the type of facility if this information is not obvious from the client's response. Site type codes for the PEMS CTR form can be found on the back of Part D.



The following question is also used to assign an incidence estimation weight to the STARHS result. The number of times tested before the current test or the first positive test is related to the likelihood that an incident case will be detected. It is important to remember that these questions are asking the number of previous tests in the two years before the current or first positive test including the current (or first positive) test and the question on the Pre-test THQ is structured in a such a way that today's test, or the first positive test is included in the count. If the current test, or the client's first positive test is the client's first HIV antibody test, then the answer to this question is "1."

5b. For people who have NEVER had a positive test: In the past two years, how many times did you get tested for HIV? Today's test has been included for you in this count.
and you get tested for fire a roday's test has been included for you in this count.
1 (today's test) + (tests before today) =
5a. For people who have had a positive test before: In the two years before your first positive
test (that is, the two years before the date in question 4b) how many times did you get tested for HIV? Your first positive test has been included for you in this count.
g
1 (my first positive test) + (tests before) =
Testing History
First time tested: / (MM/YYYY) Number of times tested for HIV in the past 2 years or in the 2 years before your first positive test:
•

The counselor then should determine the date of the client's first HIV test ever regardless of whether the result was positive or negative. This date is also used in calculating an incidence estimation weight for the STARHS result. There will be times when the client is unable to remember the date of the first test. In these cases, the client should be asked to estimate the date. Probes that might assist the client in remembering the date could include "think about the time of year that you had the test," or "did you have the test close to a significant event in your life, like your birthday or the beginning of a new relationship?"

When was the very <u>first</u> time you <u>ever</u> got tested for HIV, (when you got got the results)? Please make your best guess if you don't know for sure		
/ (month/year)	Description of the control of the co	Stronge Strong
Testing History First time tested: / (MM/YYYY) Number of times tested for HIV in the past 2 years or in the 2 years before your first positive test:		See and the second of the seco

Finally, it is important to determine the client's use of antiretroviral medications. These medications can decrease the level of HIV antibodies circulating in the blood. As a result, the test used for STARHS would be less likely to detect HIV antibodies, and could therefore produce a result that suggests a recent infection regardless of the length of time since the client's seroconversion. The interviewer should have a picture (available from the state/local HIV incidence surveillance coordinator) that depicts the antiretroviral medication that a client might have taken. This card should be shown when asking about HIV medications because a client may be unsure of the exact medications that he/she has taken or may confuse other medications for antiretroviral medications and incorrectly report that he/she has taken HIV medications.

PART II: HIV Medicines

These last questions are about HIV medicines. Sometimes these are used to try to prevent HIV infection. This is called post-exposure prophylaxis, or PEP. Some of these medicines are also used to treat Hepatitis B. These medicines can also be used in HIV treatments called HAART or the AIDS cocktail. PLEASE USE THE PICTURES OF ANTI-RETROVIRAL MEDICINES ON THE LAST PAGE WHEN ANSWERING THE NEXT QUESTIONS.

7. In the past six months have you taken any medicines shown in the picture on the last page to treat or try to prevent HIV or Hepatitis?

Yes□ ₁	Please go to Question <u>7a</u>
No	STOP, You are Finished
ا don't know	

	rediual	y 10, 2003
O Yes [1] O No [0] O Don't know [9]	aking any ARV or HIV medicines O Yes [1] O No [0] O Don't know [9] O Refused [7]	We Convenient Tables and Related From PART D WE CONVENIENT TABLES AND RELATED TO TABLES AND RELATED T

The next question is a prompt to be certain that the client has taken antiretroviral medications and to determine the type of treatment the client has received. On the PEMS CTR form codes for the medications are located on the back of Part D.

took in the last six months, please inclutime)		
		With the second
ARV or HIV Medication in last 6 months O Yes [1] O No [0] O Don't know [9] O Refused [7] First day of ARV or HIV medication: Last day of ARV or HIV medication:	Taking any ARV or HIV medicines O Yes [1] O No [0] O Don't Know [9] O Refused [7]	The state of the s

The questions that follow are asked to ascertain the timeframe during which the client took antiretroviral medication. If the client is currently taking medications then the answer to the final question (the last day that medications were taken) should be the date that the testing history interview (or questionnaire) is completed.

What was make you		 •			s sho	own in	the pic	ctures?	Please
/	/	 (month/d	ay/yea	r)					

7c. Are you now taking any of the medicines shown	n in the pictures?
No□₀ ⇒	Please go to Question <u>7d</u>
Yes	STOP, You are Finished
7d. When was the <u>last</u> day you took any of the med make your best guess if you don't know for sure	
// (month/day/year)	
ARV or HIV Medication in last 6 months Types of Medication O Yes [1] O No [0] O Don't know [9] O Refused [7] First day of ARV or HIV medication ARV or HIV medication Specify Other Medication O Yes [1] O No [0] O Refused [7] First day of ARV or HIV medication.	now (9)